

Form 2500A

16-06077-KMS

**CERTIFICATE OF SERVICE**

I, Kimberly Squires (name), certify that service of this summons and a copy of the complaint was made 12/06/2016 (date) by:

( Mail service: Regular, first class United States mail, postage fully pre-paid, addressed to:  
WILLIAM HOLLIS LEECH SR  
1062 HIGHLAND COLONY PARKWAY  
PO BOX 6020  
RIDGELAND, MS 39158

( Personal Service: By leaving the process with the defendant or with an officer or agent of defendant at:

( Residence Service: By leaving the process with the following adult at:

( Certified Mail Service on an Insured Depository Institution: By sending the process by certified mail addressed to the following officer of the defendant at:

( Publication: The defendant was served as follows: [Describe briefly]

( State Law: The defendant was served pursuant to the laws of the State of \_\_\_\_\_, as follows:  
[Describe briefly]

If service was made by personal service, by residence service, or pursuant to state law, I further certify that I am, and at all times during the service of process was, not less than 18 years of age and not a party to the matter concerning which service of process was made.

Under penalty of perjury, I declare that the foregoing is true and correct.

Date December 08, 2016

Signature Kimberly Squires

Print Name: Kimberly Squires

Business Address: 713 Arledge Street

Hattiesburg MS, 39401